1442598

**UNITED STATES** SECURITIES AND EXCHANGE COMMIS Washington, D.C. 20549 Section

FORM D

NOTICE OF SALE OF SECURITIES Shington, DC PURSUANT TO REGULATION D, 101 SECTION 4(6), AND/OR

AUG 072008

ORM LIMITED OFFERING EXEMPTION

	OMB APPROVAL
	OMB Number: 3235-0076
	Expires: Dec 31st, 2008
	Estimated average burden
	hours per response 1
i	

SEC USE ONLY					
Prefix		Serial			
DAT	E RECEI	VED			

Name of Offering ([ ] check if th Greasy Creek Prospect	is is an amendment and name has changed, and ind	licate change.)
Filing Under (Check box(es) that apply):	[ ] <u>Rule 304</u>	Rule 506 [ ] Section 4(6) [ x ] ULOE PROCESSED
Type of Filing: [x] New Filing	[ ] Amendment	PROCESSED
	A. BASIC IDENTIFICATION DATA	AUG 1 3 2008
1. Enter the information request	ed about the issuer	THOMSON RELITERS
Name of Issuer ([ ] check if thi	s is an amendment and name has changed, and indi	ciate change.) Irish Bottom Prospect Partners
Address of Executive Offices 9 Telephone Number (Including A	911 College St., Ste 102 Bowling Green KY 42101 Area Code) 270-783-3099	(Number and Street, City, State, Zip Code)
Address of Principal Business (if different from Executive Office	Operations (Number and Street, City, State, Zip Codes)	de) Telephone Number (Including Area Code)
Brief Description of Business "F	Participate in the drilling, testing and completion of up	to 2 oil and gas wells"
Type of Business Organization		
[ ] corporation	[ ] limited partnership, already formed	[ x ] other (please specify):
[ ] business trust	[ ] limited partnership, to be formed	General Partnership
	Month	Year
Actual or Estimated Date of Inc	orporation or Organization: [10]	[ 2007 ] [x] Actual [] Estimated
Jurisdiction of Incorporation or	Organization: (Enter two-letter U.S. Postal Service at CN for Canada; FN for other foreign jurisdic	obreviation for State: ction) [K ][Y]
230.501 et seq. or 15 U.S.C. 77 When to File: A notice must be the U.S. Securities and Exchan or, if received at that address at to that address. Where to File: U.S. Securities a Copies Required: Five (5) copie manually signed must be photo	ing an offering of securities in reliance on an exemption of (6).  If (6), in the first sale of securities are commission (SEC) on the earlier of the date it is a fitter the date on which it is due, on the date it was mained Exchange Commission, 450 Fifth Street, N.W., When of this notice must be filed with the SEC, one of which copies of manually signed copy or bear typed or prining must contain all information requested. Amendments	rities in the offering. A notice is deemed filed with received by the SEC at the address given below liled by United States registered or certified mail vashington, D.C. 20549. hich must be manually signed. Any copies not ted signatures.

offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

SEC 1972 (6-02)

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

## A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of
    equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[ ] Promoter	[ ] Beneficial Owner	[ ] Executive Officer	[ ] Director	[x] General and/or Managing Partner
Full Name (Last name first, it	findividual) H	ornet Oil & Gas, Corpor	ation		
Business or Residence Addr	ess (Number and	Street, City, State, Zip	Code ) 911 College St.,	Ste 102 Bowli	ng Green KY 42101
Check Box(es) that Apply:	[x] Promoter	[x] Beneficial Owner	[x] Executive Officer	[x] Directo	r [ ] General and/or Managing Partne
Full Name (Last name first, it	findividual) M	urrell, Garner A.			
Business or Residence Addr	ess (Number and	Street, City, State, Zip	Code) 911 College St.	, Ste 102 Bowl	ing Green KY 42101
Check Box(es) that Apply:	[ ] Promoter	[ ] Beneficial Owner	[ ] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last name first, i	findividual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip	Code)		
Check Box(es) that Apply:	[] Promoter	[ ] Beneficial Owner	[ ] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last name first, it	f individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip	Code		
Check Box(es) that Apply:	[ ] Promoter	[ ] Beneficial Owner	[ ] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip	Code)		
Check Box(es) that Apply:	[] Promoter	[ ] Beneficial Owner	[ ] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip	Code)		
Check Box(es) that Apply:	[ ] Promoter	[ ] Beneficial Owner	[ ] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last name first, i	f individual)				· · · · · · · · · · · · · · · · · · ·
Business or Residence Addr	ess (Number and	Street, City, State, Zip	Code)		

				E	B. INFORM	ATION A	BOUT OF	FERING				
1. Has	the issuer	sold, or d	oes the iss	suer inten	d to sell, to	non-accre	dited inve	stors in this	offering?			Yes No
				Answer	also in App	endix, Co	lumn 2, if f	iling under	ULOE.			
2. Wha	2. What is the minimum investment that will be accepted from any individual?											\$ 6,12 <u>5</u>
3. Does the offering permit joint ownership of a single unit?											Yes No	
commis person states,	ssion or sin to be liste list the nar	milar remu d is an as me of the	ineration f sociated p broker or o	or solicitat erson or a dealer. If r	tion of pure	chasers in proker or d five (5) per	connectior ealer regis sons to be	tered with to listed are	of securition of securities the SEC ar	es in the o nd/or with	offering. If a a state or	
Full Na	me (Last r	name first,	if individu	al)								
Busine	ss or Resi	dence Add	dress (Nur	nber and	Street, City	, State, Zi	Code)					
Name (	of Associa	ted Broke	r or Deale									
			ted Has S individual S		Intends to	Solicit Pu	rchasers			Į.	] All States	
[AL]	[AK]	[AZ)	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	(MI)	[MN]	[MS]	[MO]
[MT] [RI]	(NE) (SC)	[NV] [SD]	[NH] [TN]	[UJ] [XT]	(NM) (UT)	[VT]	[NC] [VA]	[ND] [WA]	(OH) [WV]	[OK]	(OR) [WY]	[PA] [PR]
Full Na	me (Last r	name first,	, if individu	al)								
Busine	ss or Resi	dence Ad	dress (Nur	nber and	Street, City	, State, Zi	p Code)					
Name (	of Associa	ted Broke	r or Deale	Γ				-				
			ited Has S		Intends to	Solicit Pu	rchasers			]	] All States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	{NH}	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[ХТ]	[UT]	[/1]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	me (Last ı	name first	, if individu	ıal)								
Busine	ss or Resi	dence Ad	dress (Nur	nber and	Street, City	y, State, Zi	p Code)					
Name	of Associa	ted Broke	r or Deale	r						<u> </u>		
			ited Has S individual S		Intends to	Solicit Pu	rchasers			[	] All States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[iA]	[KS]	[KY]	(LA)	(ME)	(MD)	[MA]	[MI]	[MN]	[MS]	[OM]
(MT)	[NE]	(NV)	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	(SD)	[TN]	[TX]	[UT]	[VT]	[VA]	[AW]	[VV]	[WI]	[WY]	(PR)

(IJse blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS	, EXPENSES AND USE OF PROCEED
--	-------------------------------

**Amount Already** 

Sold

\$ 0

Aggregate

Dollar Amount

f 1

¢ 0

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Offering Price Type of Security Debt ..... \$ 0 Equity ..... [ ] Common [ ] Preferred Convertible Securities (including warrants) ..... \$ 0 490,000 Partnership Interests ..... Other (Specify\_\_\_ 490,000

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

Answer also in Appendix, Column 3, if filing under ULOE.

Total .....

	Number Investors	Dollar Amount of Purchases \$ 0
Accredited Investors	_ 0	<u>\$ 0</u>
Total (for filings under Rule 504 only)		<u>\$ 0</u>
Total (for fillings under redic 504 only)		

Answer also in Appendix, Column 4, if filing under ULOE.

3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u>, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of offering	Type of Security	Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees	( )	<u> </u>
Printing and Engraving Costs	[ ]	\$ <u>0</u>
Legal Fees	[×]	<u>\$_7,500</u>
Accounting Fees	[×]	\$_2,000
Engineering Fees	[]	\$ <u>0</u>
Sales Commissions (specify finders' fees separately)	[1	\$ <u>0</u>

furnished in response to Part C - Question 4.a. This difference is the	e "adjusted gross proceeds to the issuer."	·····	0.000
the purposes shown. If the amount for any purpose is not known, fu the estimate. The total of the payments listed must equal the adjust	rnish an estimate and check the box to the left	f of	
response to Part C - Question 4.b above.		Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees  Purchase of real estate  Purchase, rental or leasing and installation of machinery and equipment  Construction or leasing of plant buildings and facilities  Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)  Repayment of indebtedness  Working capital  Other (specify): Drilling and Completion Costs  (\$242,000)  Management Fees (100,000)  Column Totals  Total Payments Listed (column totals added)  D. FEDERAL SIGNATURE  The issuer has duly caused this notice to be signed by the undersigned duly aut the following signature constitutes an undertaking by the issuer to furnish to the written request of its staff, the information furnished by the issuer to any non-act Rule 502.  Issuer (Print or Type)  Irish Bottom Prospect Partners  Name of Signer (Print or Type)  Garner A. Murrell  Title of Signer (Print or Type)  Garner A. Murrell		[]\$ <u>0</u>	[]\$0
Purchase of real estate		[]\$_0	[]\$_0
the contract of the contract o		[]\$_0	[]\$0
Construction or leasing of plant buildings and facilities		[]\$_0	[]\$_0
exchange for the assets or securities of another issuer		[]\$_0	[]\$0
		[]\$_0	[]\$_0
• •		[]\$_0	[]\$0
Other (specify): Drilling and Completion Costs		[]\$_0	[]\$ <u>0</u>
(\$242,000)		[]\$_100,000	_ (x ] <u>\$340,000</u>
Management Fees (100,000)			
Column Totals		[]\$_100,000	(x ) <u>\$340,000</u>
Total Payments Listed (column totals added)		[]\$	440,00
D. FE	EDERAL SIGNATURE		
the following signature constitutes an undertaking by the written request of its staff, the information furnished by the	issuer to furnish to the U.S. Securities and Exc	hange Commissior	i, upon
	Signature Mun (1)	Date 8/6/0	04
Name of Signer (Print or Type)	Title of Signer (Print or Type)		
	ATTENTION		
Intentional misstatements or omissions of fa		e 18 U.S.C. 1001.	)

Other Expenses (identify) Organizational Expenses

Total .....

[x] \$<u>40,500</u>

\$ 50,000

E. STATE SIGNATURE							
1. Is any party described in 17 CFR 230.262 pre	sently subject to any of the disqualification provisions of such rule	le? Yes No					
See	Appendix, Column 5, for state response.						
2. The undersigned issuer hereby undertakes to on Form D (17 CFR 239,500) at such times as r	furnish to any state administrator of any state in which this notic	ce is filed, a notice					
3. The undersigned issuer hereby undertakes to	furnish to the state administrators, upon written request, information	ation furnished by					
the issuer to offerees.	, tallion, to all oldin deliminations, apart						
4. The undersigned issuer represents that the is	suer is familiar with the conditions that must be satisfied to be er	ntitled to the Uniform					
limited Offering Exemption (ULOE) of the state i	n which this notice is filed and understands that the issuer claimi	ing the availability of					
this exemption has the burden of establishing th	at these conditions have been satisfied.						
	the contents to be trye and has duly caused this notice to be sign	ned on its behalf by					
the undersigned duly authorized person.	N	<del></del>					
Issuer (Print or Type)		Date of 100					
Irish Bottom Prospect Partners	- KIINE II	876/08					
Name of Signer (Print or Type)	Titlé (Print or Type)						
Garner A. Murrell	President						

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## APPENDIX

			2			4		5	
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		3 Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL.	<u> </u>								
AK									
AZ									
AR									
CA									
со									
СТ									
DE									
DC									
FL									
GA									
HI									
[ D]									
IL									
IN									ļi
IA									<u> </u>
KS									
KY									<u> </u>
LA									<u> </u>
ME									ļl
MD		<u> </u>							<u> </u>
MA						· · · · · · · · · · · · · · · · · · ·			
MI									<u> </u>
MN					<u> </u>				<u> </u>
MS					]				ļ
МО		<u> </u>		1					<u> </u>
MT					<u> </u>		<u> </u>	<u> </u>	ļ
NE				 	<u> </u>		<u> </u>		
NV		<u> </u>		1	<u> </u>				<del> </del>
NH	<u> </u>	<u> </u>		1	<u> </u>		! !	<u> </u>	
NJ		<u> </u>					<u> </u>		<del> </del>
NM		<u> </u>		<u> </u>	l		<u>                                     </u>		<del>  </del>
NY		<u> </u>		<u> </u>			<u> </u> 		<del> </del>
NC		<del> </del>		<u> </u>	<u> </u> 		<u> </u>		
ND		<u> </u>	<u> </u>	1	<u> </u>	 	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
OK		<u> </u> 	<u> </u>	<u> </u>	1		<del> </del>		<del> </del>
OR		<del>                                     </del>	1				<u> </u>		<del>                                     </del>
PA		<del> </del>			<i>i</i>				
RI			! 		<u> </u>	1	<u> </u>		
SC		<u> </u>	[		I		i		<del>  </del>
SD			!	<u> </u>	1		l		├
TN		<u> </u>	! 	1	<del>!</del>		l		<del> </del>
TX		<u> </u>	1	1	<u> </u>	!	<del> </del>	<u> </u>	
17		<u>!</u>	<u> </u>	1	i	<u> </u>	1	·	<u></u>

UT				
VT				<u> </u>
VA				
WA				
w				
WI				
WY				
PR				

Canada			
Canada			

http://www.sec.gov/divisions/corpfin/forms/formd.htm Last update: 06/06/2002

